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APPLICANTS

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**** CONTINUING DATA *******

Coan 53/55
 THIS APPLICATION IS A REI OF 08/646,016 05/07/1996 PAT 5,771,657

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED****** 07/28/2000**

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NJ	SHEETS DRAWING 11	TOTAL CLAIMS 134	INDEPENDENT CLAIMS 17
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TITLE

Automatic prescription filling, sorting and packaging system

FILING FEE RECEIVED 3808	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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